

ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	ID NO.	DATE
FEE DETERMINATION	44.12	06-13-01
O.I.P.E. CLASSIFIER	21	223
FORMALITY REVIEW	SS 513	09-10-01
RESPONSE FORMALITY REVIEW		

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	01/30/03
2	✓	✓	01/30/03
3	✓	✓	01/30/03
4	✓	✓	01/30/03
5	✓	✓	01/30/03
6	✓	✓	01/30/03
7	✓	✓	01/30/03
8	✓	✓	01/30/03
9	✓	✓	01/30/03
10	✓	✓	01/30/03
11	✓	✓	01/30/03
12	✓	✓	01/30/03
13	✓	✓	01/30/03
14	✓	✓	01/30/03
15	✓	✓	01/30/03
16	✓	✓	01/30/03
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25	✓	✓	01/30/03
26	✓	✓	01/30/03
27	✓	✓	01/30/03
28	✓	✓	01/30/03
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31	✓	✓	01/30/03
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42	✓	✓	01/30/03
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45	✓	✓	01/30/03
46	✓	✓	01/30/03
47	✓	✓	01/30/03
48	✓	✓	01/30/03
49	✓	✓	01/30/03
50	✓	✓	01/30/03

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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